AVOID DE COP Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 09/14/1065												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	ITITY	OR	OTHER SMALL I	1
TOTAL CLAIMS			60					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<i>6</i> ○ minus 20=		· Bo			X\$ 9=		OR	X\$18=	1220
INDEPENDENT CLAIMS			minus 3 =		• 3			X40=		OR	X80=	240.00
MULTIPLE DEPENDENT CLAIM PR			RESÉNT					+135=		OR	+270=	
* If	the difference	in column 1 is l	ess than zero, enter "0" in c			olumn 2		TOTAL		OR	TOTAL	1670.w
CLAIMS AS AMENDED - PART II								•		•	OTHER	
						(Column 3)	<u> </u>	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
	Independent	*	Minus	***		=		X40=		OR	X80=	
•	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	PENDEN	T CLAIM			105				
\								+135= TOTAL		OR	+270= TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									1		455	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 66	Minus	** 6	3	= 3		X\$ 9=		OR	X\$18=	154
	Independent	. 12	Minus	***	9	= 3		X40=		OR	X80=	300
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								AUDII. FEE	,		ADDIT: I EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***]=		X40=		OR	X80=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		.
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa						und in the ap	propriate bo	x in c	olumn 1.	